

rule with a primary purpose to address risks to health, safety or the environment, as well as for risk assessments that are not the basis for a rulemaking and that the OMB Director determines may have a substantial impact on public policy or the economy. The Managers' Amendment narrows the coverage of the bill with respect to risk assessments that are not the basis of a rulemaking to those risk assessments that the Director anticipates are likely to have an annual effect on the economy of \$100 million or more.

5. PEER REVIEW

The bill as reported requires independent peer review of the cost-benefit analysis and risk assessment for each major rule. The Managers' Amendment would modify the application of peer review of the cost-benefit analysis to only those rules that the agency or OMB Director reasonably anticipates are likely to have an annual effect on the economy of \$500 million or more.

The Managers' Amendment clarifies that members of agency advisory boards required by statute and persons who serve as contractors or grantees to the agency conducting the peer review are not precluded from serving as peer reviewers solely because of the requirement that the peer reviewers be "independent of the agency." The Managers' Amendment also clarifies that only one peer review of a risk assessment and cost-benefit analysis is required by S. 981.

6. NET BENEFITS

The Managers' Amendment clarifies that application of a net benefits analysis under S. 981 is not intended to be limited to only quantifiable benefits; S. 981 requires the net benefits analysis to include consideration of nonquantifiable as well as quantifiable benefits.

7. SUBSTITUTION RISK

The Managers' Amendment, in an effort to clarify the scope of responsibility required of an agency in assessing applicable substitution risks, incorporates the language in the bill used to define costs and benefits. Thus, substitution risk is defined in the Managers' Amendment as "a reasonably identifiable significant increased risk to health, safety or the environment expected to result from a regulatory option." The definition also makes it clear that substitution risk does not include "risks attributable to the effect of an option on the income of individuals."

8. EXEMPTIONS

The bill as reported exempts from coverage of the legislation "a rule or agency action that authorizes the introduction into commerce, or recognizes the marketable status of, a product." The Managers' Amendment both expands and limits this exemption. It expands it by adding "removal" of a product as well as "introduction;" it limits this exemption by applying it only to rules "under the Federal Food, Drug and Cosmetic Act."

9. OTHER

The Managers' Amendment would make a number of other technical or minor changes to the bill.●

JOHN D. ODEGARD, RECIPIENT OF THE FAA 1998 EXCELLENCE IN AVIATION AWARD

● Mr. DORGAN. Mr. President, I rise today to congratulate the John D. Odegard School of Aerospace Sciences at the University of North Dakota, and its dean and founder, John Odegard who have been selected by the Federal Aviation Administration to receive its

1998 Excellence in Aviation award. In addition to being one of North Dakota's most outstanding entrepreneurs, John is also a personal friend of mine and I can attest to the fact that this honor is truly deserved. It accurately reflects the contributions that John and the college have made to aviation education and research to make flying safer in our country.

Announcing the award, FAA Administrator Jane Garvey noted,

The FAA formally recognizes significant aviation research accomplishments each year through the Excellence in Aviation award. This research plays a prominent role in ensuring that the nation's airspace system remains the safest in the world.

"Aviation weather research conducted at the John D. Odegard School of Aerospace Sciences contributed to the development of the Terminal Doppler Weather Radar, which is used to detect wind shear near airports. The aerospace school, which has conducted aviation research, education and training programs for over 30 years, participates in a FAA-sponsored research project to chart wind conditions at the Juneau, Alaska, airport.

Mr. CONRAD. I join my colleague, Senator DORGAN, in congratulating Dean Odegard on this exceptional and well deserved honor from the FAA.

Dean Odegard and the Odegard School, which this year was named in his honor by a grateful state, are true national assets. John's work building the School at the University of North Dakota is one of the great accomplishments in North Dakota in my lifetime. His vision and ability to make his dreams a reality sets him apart in all of higher education and aviation. He began his career in 1968 with two small planes and a dozen students and transformed this fledgling operation into the premier aerospace training facility in the world with 1400 students, a fleet of 85 aircraft and 16 flight simulators.

The contributions of John Odegard and his staff and faculty to aviation safety in the development of new pilot training programs is a major achievement. His leadership in the creation of university-based air traffic controller training is providing our country with superior new young controllers that our country's air space system desperately needs. As the Administrator noted in her citation, UND's work in FAA-sponsored atmospheric research has resulted in the Terminal Doppler Weather Radar that is now making air travel even safer in the United States.

It is also important to note that the contributions made by the Odegard School to improvements in national aviation safety are a direct product of the investment the Federal government made almost 20 years ago. It was the FAA's Airway Science Program, begun in the early 1980's, that helped build the Odegard School's facilities on the University of North Dakota campus. Those investments, of which we are very proud, are paying dividends today in lives saved. That's what the FAA award recognizes.

Mr. DORGAN. Within our state, John's achievements are well recog-

nized. The North Dakota State Board of Higher Education has honored John by placing his name on the aviation college at the University of North Dakota. The Odegard School of Aerospace Sciences is one of our state's flagship programs and draws students from every state in the nation as well as many foreign countries. Airlines from around the world send its pilots to be trained at UND. Its size and number of employees means it is also a significant economic asset and has served to help draw the aerospace industry to North Dakota.

Again, I want to offer my congratulations to John and all his faculty and staff at the Odegard School. We look forward to their continued contributions to the aerospace industry, not only in North Dakota but throughout the world.●

RETIREMENT FROM CONGRESS OF REPRESENTATIVE THOMAS J. MANTON

● Mr. MOYNIHAN. Mr. President, yesterday, a dear friend and colleague, Representative THOMAS J. MANTON, announced his intention to retire at the end of the 105th Congress, saying, "I have worked for the citizens of this Nation, New York City, and Queens for most of my adult life." Indeed he has. Fourteen years as a Member of Congress. Fifteen years before that as a member of the New York City Council. Five years as an officer in the New York City Police Department. And two years as a Marine Corps flight navigator on active duty during Korea.

His departure is bittersweet for me. I take solace from the fact that he will continue to chair the Queens County Democratic Organization, a post he has held with honor and distinction for the past twelve years. And I am happy that he and his wife Diane will have more time "to enjoy life and travel," as he put it; to enjoy his four children and—as of July 5th—his four grandchildren. But we here will miss his calm and steady demeanor, and his unwavering commitment to "moderate government," which is, as Alexander Hamilton observed, the font of real liberty.

For the most part, I will leave it to others to recite his legislative accomplishments, which are legion. But I would highlight his service as co-chairman of the Congressional Ad-Hoc Committee on Irish Affairs. The bi-partisan Ad-Hoc Committee was established in 1977 to promote peace and justice in Northern Ireland. His interest is natural, for both his parents were Irish immigrants. The task, of course, enormous. But under Tom's steady leadership, the Ad-Hoc Committee made possible implementation of the McBride Principles. And the Ad-Hoc Committee had a huge role in this year's Good Friday Irish Peace Accord. Few men or women have had such positive effect in such a devastated and forlorn part of the world.

Horace remarked that "We rarely find anyone . . . who, content with his

life, can retire from the world like a satisfied guest." TOM MANTON is the rare individual who can retire from Congress like a "satisfied guest." God-speed, dear friend.●

PROSTATE CANCER RESEARCH FUNDING

● Ms. MOSELEY-BRAUN. Mr. President, I would like to call the attention of my colleagues to a national health epidemic that kills 40,000 American men every year and strikes hundreds of thousands more each year—prostate cancer. I am concerned about this disease and its impact on American men, particularly its disproportionate impact on African-American men.

For too long prostate cancer has been a silent killer. Too little has been known about it. Too little was said about it. Too little has been done about it. Fortunately, in recent years many prominent national figures like Senator Bob Dole, General Norman Schwarzkopf, Arnold Palmer, Sidney Poitier, Andy Grove, and Harry Belafonte have come forward to discuss their personal battles with prostate cancer. The admirable leadership of these men and others has helped educate the country about the importance of screening and early diagnosis of prostate cancer, and the need for all of us to do more to fight this disease.

Mr. President, prostate cancer is the most commonly occurring non-skin cancer in the United States. In 1997, more than 200,000 men were diagnosed with prostate cancer and 41,800 died of the disease. Every three minutes a new case of prostate cancer is diagnosed and every 13 minutes someone dies from the disease. While it is often thought to be an older man's disease, younger men are increasingly diagnosed with prostate cancer. In fact, about 20 percent of prostate cancers are now occurring in men between the ages of 40 and 60.

Although prostate cancer accounts for approximately 20 percent of all new non-skin cancers, it receives less than four percent of federal cancer research funding. In 1996, approximately the same number of lives were lost due to prostate cancer breast cancer and AIDS. In 1997, however, while prostate cancer deaths continued to rise, deaths due to breast cancer and AIDS declined. Nevertheless, the federal commitment to prostate cancer research has not even kept pace with these other priorities.

Clearly, I am not advocating reduced funding for breast cancer or AIDS research programs. I have been one of the major champions of breast cancer and AIDS research funding. Rather, I use these comparisons to make the point that much more must be done to address the prostate cancer epidemic as well. How can we face the hundreds of thousands of men and their families who are daily affected by prostate cancer knowing, for instance, that more money was spent to make the movie

Titanic—more than \$200 million—than was spent in 1997 by the federal government for prostate cancer research—only \$120 million.

The possibility and the fear of developing prostate cancer is common to all men. One in five American men will develop prostate cancer during his lifetime. As frightening as that statistic may be for the general population, it is even more pointed in the African-American community. African-American men have a prostate cancer incidence more than 30 percent higher than for any other ethnic groups in this country and the highest in the world.

The prostate cancer mortality rate for African-American men is more than twice that of white American men. Researchers do not yet know why this is true and do not yet have answers to these and the many other questions about prostate cancer. For example, it is not clear which prostate cancer patients will benefit from traditional treatments, like surgery or radiation. The economic status of many African-American men, and limited access to medical counseling further complicated treatment decisions.

Those who are devoted to relieving the burden of prostate cancer in the African-American community, including scientists, health care providers, national organizations, community leaders, and survivors alike, are united in their desire to find answers to these questions. I am particularly pleased with the leadership of many national organizations in informing the country about the impact of prostate cancer in the African-American community. In November of last year, the American Cancer Society, the National Cancer Institute, and the Centers for Disease Control and Prevention sponsored a Leadership Council on Prostate Cancer in the African-American Community. In cooperation with the Intercultural Cancer Council, the National Black Leadership Initiative on Cancer, the National Prostate Cancer Coalition and the 100 Black Men of America, the Leadership Conference proposed a blueprint for action that aims to solve the problem of prostate cancer in the African-American community.

These private organizations—and many others—are working very hard at the community and national levels to see that the prostate cancer epidemic is addressed. That a letter that 29 organizations representing the African-American community sent to Congress in May laying out a research funding agenda to attack this problem be printed in the RECORD.

The letter follows:

MAY 20, 1998.

DEAR MEMBER OF CONGRESS: We have come together as organizations representing the African American community to develop a united response to one of the most significant medical and social challenges facing our country today—the severe burden of prostate cancer in African American men. Together, our organizations represent millions of Americans. We strongly urge you to support significant increases in federal funding for prostate cancer research.

African American men have the highest rate of prostate cancer mortality in the world. In 1994, the prostate cancer mortality rate for African American men was at least two times higher than rates for all other racial and ethnic groups in the U.S. Overall, prostate cancer is the most commonly diagnosed cancer in America, excluding skin cancer, and it is the second leading cause of cancer death among men. Last year, 41,800 men died from prostate cancer and 209,000 were diagnosed with the disease.

Federal funding for prostate cancer research has been woefully inadequate, particularly given the devastating impact of the disease. We therefore strongly urge you to support increased appropriations for FY 1999 prostate cancer research programs, including the following.

Department of Defense (DOD)—The DOD conducts highly successful peer reviewed research programs that are renowned for their innovative and efficient use of resources. We call on Congress to fund this innovative program at \$175 million for FY 1999—a level which is in the middle range of other Congressionally-directed medical research programs at DOD.

National Institutes of Health (NIH)—Prostate cancer research at NIH has not reflected the incidence and mortality rates of the disease. We believe prostate cancer research funding at NIH must be substantially increased to a level commensurate with the impact prostate cancer has on the American population.

Center for Disease Control and Prevention (CDC)—The CDC supports the development and communication of health messages about prostate cancer screening and early detection, particularly focusing on African American men and their families. We believe the CDC appropriation for prostate cancer must be doubled—to \$10 million—so that it can engage in aggressive outreach and education and health communications research, particularly for high risk groups.

We believe that the research programs of the National Institutes of Health, the Department of Defense, and the Centers for Disease Control and Prevention offer great promise in the fight against prostate cancer in the African American community. We urge you to support our request by increasing funding for these critically important programs.

Sincerely,

David S. Rosenthal, M.D., President, American Cancer Society.

Thomas W. Dortch, Jr., President, 100 Black Men of America.

Norman Hill, President, A. Philip Randolph Institute.

Dale P. Dirks, Washington Representative, Associate of Minority Health Professions Schools.

Dr. Charles H. Mitchell, Co-Convener, Breakfast Group.

Dr. Shirley B. Carmack, Founder, GNLD Wellness Center.

Armin D. Weinberg, Ph.D., Co-Chair, Intercultural Cancer Council.

Kweisi, Mfume, President and CEO, NAACP.

Deborah Lee-Eddie, President, National Association of Health Services Executives.

Dr. Betty Smith Williams, President, National Black Nurses Association.

Barbara P. Van Blake, Director, Human Rights and Community Relations, American Federation of Teachers, AFL-CIO.

Rev. Dr. Joseph E. Lowery, Chairman and CEO, Black Leadership Forum.

Wil Duncan, Special Assistant to the President, Coalition of Black Trade Unionists.

Lovell A. Jones, Ph.D., Co-Chair, Intercultural Cancer Council.

Abdul Alim Muhammad, M.D., Minister of Health and Human Services, Nation of Islam.